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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (ii known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Hursean	
	your government-issued picture identification (for	First name	First name
	example, your driver's	M.	
	license or passport).	Middle name	Middle name
	Bring your picture	_ McGraw-Whitfield	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
			17
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer	xxx-xx-6427	
	Identification number (ITIN)		

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De	btor 1 McGraw-Whitfield	d, Hursean M.	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		1496 Forest Ave Calumet City, IL 60409-6241	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 McGraw-Whitfield		d, Hursean M.			Case number (if known)			
Dor	• 2.	Tall the Count About 1	dan Bank	······•				
Par 7.	The	Tell the Court About \ chapter of the	Check or	ne. (For a b	rief description of each, see Noti		11 U.S.C. § 342(b) for Individuals Filing for Bankruptc	y (Form
		ruptcy Code you are sing to file under		. •	he top of page 1 and check the a	ppropriate box.		
		_	■ Chap					
			☐ Chap					
			☐ Chap					
			☐ Chap	iter 13				
8.	How	you will pay the fee	ab	out how you	u may pay. Typically, if you are pays by is submitting your payment on	aying the fee you	ck with the clerk's office in your local court for more de irself, you may pay with cash, cashier's check, or mon r attorney may pay with a credit card or check with a	
					y the fee in installments. If you installments (Official Form 103A)		on, sign and attach the Application for Individuals to Pa	ay The
			☐ I re	equest that t required to ur family size	nt my fee be waived (You may roo, waive your fee, and may do so	equest this option only if your inco fee in installmen	n only if you are filing for Chapter 7. By law, a judge me is less than 150% of the official poverty line that apts). If you choose this option, you must fill out the App, and file it with your petition.	plies to
9.		you filed for ruptcy within the last ars?	■ No.	District District		When	Case number Case number	
				District		When	Case number	
10.	pend a spe this d a bus	any bankruptcy cases ling or being filed by ouse who is not filing case with you, or by siness partner, or by filiate?	■ No □ Yes.					
				Debtor	<del></del>		Relationship to you	
				District	·	When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	■ No.	Go to I	line 12.			
	resid	lence?	☐ Yes.	Has yo	our landlord obtained an eviction	ı judgment agair	nst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Statement All</i> bankruptcy petition.	oout an Eviction	Judgment Against You (Form 101A) and file it as part	of this

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Deb	tor 1 McGraw-Whitfield	<u>, Hursea</u>	n M.		Case number (if known)
Par	Report About Any Bus	sinesses \	You Own	as a Sole Proprieto	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	iness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numi	per, Street, City, Stat	e & ZIP Code
	to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-fl	dicate that you are a ow statement, and fed	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	l am	not filing under Chap	tter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	l am Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?	
	safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or				
	livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
	•				Number, Street, City, State & Zip Code

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Debtor 1 McGraw-Whitfield, Hursean M. Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. The law requires that you Attach a copy of the certificate and the payment plan, receive a briefing about Attach a copy of the certificate and the payment plan, if any, if any, that you developed with the agency. that you developed with the agency. credit counseling before you file for bankruptcy. You must truthfully check one of I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I the following choices. If you counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate filed this bankruptcy petition, but I do not have a cannot do so, you are not eligible to file. certificate of completion. of completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you If you file anyway, the court you MUST file a copy of the certificate and payment MUST file a copy of the certificate and payment plan, if any. can dismiss your case, you plan, if any. will lose whatever filing fee you paid, and your creditors ☐ I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services can begin collection from an approved agency, but was unable to obtain services from an approved agency, but was activities again. unable to obtain those services during the 7 those services during the 7 days after I made my days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary walver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made to requirement, attach a separate sheet explaining what obtain the briefing, why you were unable to obtain it before efforts you made to obtain the briefing, why you were you filed for bankruptcy, and what exigent circumstances unable to obtain it before you filed for bankruptcy, and required you to file this case. what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied with case. your reasons for not receiving a briefing before you filed for Your case may be dismissed if the court is bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must file If the court is satisfied with your reasons, you must a certificate from the approved agency, along with a copy of still receive a briefing within 30 days after you file. the payment plan you developed, if any. If you do not do so, You must file a certificate from the approved agency, your case may be dismissed. along with a copy of the payment plan you developed, if any. If you do not do so, your case may be Anv extension of the 30-day deadline is granted only for dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or making makes me incapable of realizing or making rational rational decisions about finances. decisions about finances. Disability. ☐ Disability. My physical disability causes me to be unable My physical disability causes me to be unable to participate in a briefing in person, by phone, or through to participate in a briefing in person, by phone, or through the internet, even after I reasonably the internet, even after I reasonably tried to do so. tried to do so. Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a military military combat zone. combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about about credit counseling, you must file a motion for credit counseling, you must file a motion for waiver of credit

waiver credit counseling with the court.

counseling with the court.

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Det	otor 1 McGraw-Whitfield	<u>i, Hursear</u>	Arsean M. Case number (if known)							
Par	t 6: Answer These Questi	ons for Rep	oorting Purposes							
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurre individual primarily for a personal, family, or household purpose."							
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily b for a business or investment	usiness debts? Business debts are debts to or through the operation of the business or in	hat you incurred to obtain money ivestment.					
			☐ No. Go to line 16c.							
			Yes. Go to line 17.							
		16c. -	State the type of debts you or	we that are not consumer debts or business of	debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and		l am filing under Chapter 7. [ paid that funds will be availat	Do you estimate that after any exempt propert ole to distribute to unsecured creditors?	y is excluded and administrative expenses are					
	administrative expenses are paid that funds will be		■ No							
	available for distribution to unsecured creditors?		☐ Yes							
18.	How many Creditors do	<b>■</b> 1-49		<b>1,000-5,000</b>	<b>25,001-50,000</b>					
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	□ 50,001-100,000					
		□ 100-19 □ 200-99	<del>-</del>	□ 10,001-25,000	☐ More than100,000					
19.	How much do you	□ \$0 - \$5	0,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion					
	estimate your assets to be worth?	\$50,00	1 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion					
			01 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion					
		₩ \$500,0	01 - \$1 million		in wore than \$50 billion					
20.		□ \$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion					
	estimate your liabilities to be?		1 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion					
			01 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion					
		□ \$500,0	01 - \$1 million		☐ More than \$50 billion					
Par	7: Sign Below									
For	you	I have exar	mined this petition, and I decl	are under penalty of perjury that the informati	on provided is true and correct.					
		If I have ch States Coo	nosen to file under Chapter 7 de. I understand the relief ava	7, I am aware that I may proceed, if eligible, iilable under each chapter, and I choose to pr	under Chapter 7, 11,12, or 13 of title 11, United occed under Chapter 7.					
		If no attorn have obtain	ey represents me and I did n ned and read the notice requi	ot pay or agree to pay someone who is not ar red by 11 U.S.C. § 342(b).	attorney to help me fill out this document, I					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.								
	(h	l understat	outlaking a false statement, earlier tres up to \$250,000,	concealing property, or obtaining money or property, or imprisonment for up to 20 years, or both.	roperty by fraud in connection with a bankruptcy 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
	' (V		M. McGraw-Whitfield of Debtor 1	Signature of Debto	r 2					
		Executed of	***************************************	Executed on						
			MM / DD / YYYY	MM	I / DD / YYYY					

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Debtor 1 McGraw-Whitfield	d, Hursean M.	Case	e number (if known)
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United State	s Code, and have explained t	rmed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the be required by 11 U.S.C. § 342(b) and, in a case in
If you are not represented by an attorney, you do not need to file this page.	which § 707(b)(4)(D) applies, certify that I have petition is incorrect.	no knowledge after an inquir	y that the information in the schedules filed with the
	/s/ Michael R. Richmond	Date	April 9, 2018
	Signature of Attorney for Debtor		MM / DD / YYYY
	Michael R. Richmond		
	Printed name		
	Heller & Richmond, Ltd.		
	Firm name		
	33 N Dearborn St Ste 1907		
	Chicago, IL 60602-3828		
	Number, Street, City, State & ZIP Code		
	Contact phone (312) 781-6700	Email address	mrichmond@hellerrichmond.com
	3124632		
	Bar number & State		<del></del>

Hursean M. McGraw-Whitfield First Name		Case 18-10262	2 Doc 1	_	04/09/18 :ument	Entered 04/09/1	16 12.13.30	Des	c Main
First Name	ill in this in	formation to identify	our case and thi						
public 2 public 19   First Name   Middle Name   Last Name	Debtor 1	Hursean M.	McGraw-Whitfi	eld					
Piest Name		First Name	Middle	e Name		Last Name			
Check if this is amended filing	Spouse, if filing)	First Name	Middle	e Name		Last Name			
Difficial Form 106A/B  Schedule A/B: Property  12/15  12/1	Inited States	Bankruptcy Court for	the: NORTHER	N DISTE	RICT OF ILLIN	IOIS, EASTERN DIVISION	1		
Difficial Form 106A/B  Schedule A/B: Property  12/15  12/1	ase number	r							Chack if this is a
ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you nk it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct ormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). It is best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct ormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). It is best every question.  Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply Single-family home Deplet or multi-unit building Condominium or cooperative Condominium or cooperative Department of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of		·				-		!	_
Do you own or have any legal or equitable interest in any residence, building, land, or similar property?  No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Calumet City IL 60409-6241 City State ZIP Code  Manufactured or mobile home Land Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In  What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Describe the nature of twe portion you own?  \$69,000.00 \$69,000.01  Sepondo.00  Sepondo.00  Sepondo.00  Current value of the entire property? Sepondo.00 Sepondo.00 Sepondo.00  Sepondo.00  Check if this is community property (see instructions) Other information you wish to add about this item, such as local	each categor ink it fits best formation. If r	ule A/B: Pr ry, separately list and de t. Be as complete and a more space is needed, a	scribe items. List a	e. If two n	narried people	are filing together, both are	equally responsibl	e for supp	lying correct
Do you own or have any legal or equitable interest in any residence, building, land, or similar property?    No. Go to Part 2.		•							
No. Go to Part 2.  Yes. Where is the property?  What is the property? Check all that apply  I 1496 Forest Ave  Street address, if available, or other description  Calumet City   IL   60409-6241   City   State   ZIP Code   Current value of the portion you own?    Calumet City   IL   60409-6241   City   State   ZIP Code   Current value of the portion you own?    Calumet City   IL   60409-6241   City   Current value of the portion you own?    Calumet City   IL   60409-6241   City   Current value of the portion you own?    Calumet City   IL   60409-6241   City   Current value of the portion you own?    City   Current value of the entire property?   S69,000.00   S69,000.00   S69,000.00    Calumet City   Current value of the portion you own?    City   Check in this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the portion you own?    County   Check if this is community property   Check one   Current value of the entire property?									
What is the property? Check all that apply  1.1  1.496 Forest Ave Street address, if available, or other description  Calumet City IL 60409-6241  City State ZIP Code  Investment property Inmeshare Other information you wish to add about this item, such as local			uitable interest in a	ny reside	nce, building, l	land, or similar property?			
What is the property? Check all that apply  I 496 Forest Ave  Street address, if available, or other description  Calumet City  IL 60409-6241  City  State  ZIP Code  Manufactured or mobile home Land Investment property Timeshare Other  Other  Debtor 1 only  Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Carrent value of the entire property? Phage of the entire property?  \$69,000.00 \$69,000.0  \$69,000.0  County  County  County  Check if this is community property (see instructions)  Other information you wish to add about this item, such as local	_								
Street address, if available, or other description  Single-family home Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Calumet City IL 60409-6241  City State ZIP Code Investment property Investment property Investment property? Check one Other Who has an interest in the property? Check one Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.  County  County  Check if this is community property (see instructions)  Check if this is community property Check one Other information you wish to add about this item, such as local	Yes. Whe	ere is the property?							
Street address, if available, or other description  Single-family home Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Calumet City IL 60409-6241  City State ZIP Code Investment property Investment property Investment property? Check one Other Who has an interest in the property? Check one Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.  County  County  Check if this is community property (see instructions)  Check if this is community property Check one Other information you wish to add about this item, such as local									
Street address, if available, or other description  Single-family home Duplex or multi-unit building Calumet City IL 60409-6241  City State ZIP Code  Manufactured or mobile home Land Investment property Investment property Investment property? Check one Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local  Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Calumet City IL 60409-6241  Land Current value of the entire property? \$69,000.00 \$69,000.0  \$69,000.0  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.  Check if this is community property (see instructions)	.1			What	is the property	? Check all that apply			
Street address, if available, or other description  Condominium or cooperative  Manufactured or mobile home  Land  Land  Investment property  State  City  State  ZIP Code  Investment property  Timeshare  Other  Other  Who has an interest in the property? Check one  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local  Current value of the entire property?  Current value of the entire property?  Postrion you own?  Current value of the entire property?  Current value of the entire property?  Postrion you own?  Current value of the entire property?  Current value of the entire property?  Postrion you own?  Current value of the entire property?  Current value of the entire property?  Postrion you own?  Current value of the entire property?  Postrion you own?  Current value of the entire property?  Current value of the entire property?  Postrion you own?  Current value of the entire property?  Current value of the entire property?  Postrion you own?  Current value of the entire property?  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  Check if this is community property  Check if this is community property	4 400 5				Single-family h	nome			
Calumet City IL 60409-6241  City State ZIP Code   Investment property   S69,000.00   S69,000.00    Who has an interest in the property? Check one Debtor 1 only    Debtor 1 only   Debtor 1 and Debtor 2 only   At least one of the debtors and another    Current value of the entire property?   S69,000.00   S69,000.00    Current value of the entire property?   S69,000.00    Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.			cription		Duplex or mult	i-unit building			
Calumet City  IL 60409-6241  City  State  ZIP Code  Investment property		,	•		Condominium	or cooperative			
County  Timeshare Other Other Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local  Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known.  Check if this is community property (see instructions)	Calum	et City IL	60409-6241	_		or mobile home			
Other Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, of a life estate), if known.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Other information you wish to add about this item, such as local	City	State	ZIP Code			pperty	\$69,00	00.00	\$69,000.0
Who has an interest in the property? Check one  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local									
County  Debtor 2 only  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local				Who I	nas an interest	in the property? Check one	•		ioy by the entireties, e
County  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, such as local					-				
At least one of the debtors and another  Other information you wish to add about this item, such as local	County					Debtor 2 only			
·						•			nunity property
					•		m, such as local		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Case 18-10262 Doc 1 Filed 04/09/18 Entered 04/09/18 12:13:36 Desc Main Page 9 of 62 Case number (if known) Document Debtor 1 McGraw-Whitfield, Hursean M 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Nissan Who has an interest in the property? Check one 3 1 Make the amount of any secured claims on Schedule D: **Altima** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2015 Debtor 2 only Current value of the Current value of the Approximate mileage: 28000 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$15,000.00 \$15,000.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Hyundai Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Sonata Model Debtor 1 only Creditors Who Have Claims Secured by Property. 2011 Year. Debtor 2 only Current value of the Current value of the 170000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$4,000.00 \$4,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$19,000.00 .you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe.... furniture \$750.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

iphone 6, 50" TV, HP Laptop, 2-32" TVs

\$500.00

page 2

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

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Case number (if known) Document Debtor 1 McGraw-Whitfield, Hursean M 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... wearing apparel \$900.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses

■ No

14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

\$2,150.00

Part 4: Describe Your Financial Assets

☐ Yes. Describe.....

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No

Cash on Hand

\$7.00

17. Deposits of money

16. Cash

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No Institution name: Yes.....

> Checking Account Wood Forest National Bank \$400.00 17.1.

> Checking Account Chiicago Patrolmans Credit Union \$50.00 17.2.

> **Chicago Patrolmans Credit Union** \$80.00 **Savings Account** 17.3.

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Case number (if known) Document Debtor 1 McGraw-Whitfield, Hursean M 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Pension Plan CTA Pension** unknown 401(k) or Similar Plan CTA 401(k) unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them...

#### ■ No

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

 $\hfill \square$  Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

		Case 18-10262	Doc 1		Entered 04/09/18 12:13:36	Desc Main
D	ebtor 1	McGraw-Whitfield, H	lursean M.	Document	Page 12 of 62  Case number (if known)	
28	_	ınds owed to you				
	■ No □ Yes. C	Give specific information ab	oout them, incl	uding whether you alread	y filed the returns and the tax years	
29	■ No		,,,	usal support, child suppo	rt, maintenance, divorce settlement, property :	settlement
30	Example ■ No	mounts someone owes y les: Unpaid wages, disabilit unpaid loans you mad Give specific information	ty insurance pa		ts, sick pay, vacation pay, workers' compensat	ion, Social Security benefits;
31	. Interest:	s in insurance policies	e insurance; he	ealth savings account (HS	SA); credit, homeowner's, or renter's insurance	
	☐ Yes. N	lame the insurance compa Com	ny of each pol npany name:	icy and list its value.	Beneficiary:	Surrender or refund value:
32	If you and died. ■ No	erest in property that is done the beneficiary of a living Give specific information			I rance policy, or are currently entitled to receive p	property because someone has
33	Exampl ■ No	against third parties, who es: Accidents, employment Describe each claim	nt disputes, in		or made a demand for payment to sue	
34	■ No	ontingent and unliquidate  Describe each claim		every nature, including	counterclaims of the debtor and rights to s	et off claims
35	. Any fina	ancial assets you did not	already list			
	■ No □ Yes. 0	Give specific information				
30		ne dollar value of all of your write that number here.			y entries for pages you have attached for	\$537.00
P	art 5: Des	cribe Any Business-Related	d Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
	Do you on  No. Go  Yes. Go		itable interest	in any business-related pr	operty?	
P		cribe Any Farm- and Comm u own or have an interest in fa			n or Have an Interest In.	
46	No. 0	own or have any legal or Go to Part 7. Go to line 47.	equitable in	terest in any farm- or co	ommercial fishing-related property?	
P	art 7:	Describe All Property You	Own or Have a	an Interest in That You Did	Not List Above	

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Case number (if known) Document Debtor 1 McGraw-Whitfield, Hursean M 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$69,000.00 Part 2: Total vehicles, line 5 56. \$19,000.00 57. Part 3: Total personal and household items, line 15 \$2,150.00 Part 4: Total financial assets, line 36 58. \$<u>537</u>.00 59. Part 5: Total business-related property, line 45 \$0.00

\$0.00

\$0.00

\$21,687.00

Copy personal property total

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63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Part 7: Total other property not listed, line 54

Part 6: Total farm- and fishing-related property, line 52

60.

61.

Doc 1

\$90,687.00

\$21,687.00

Desc Main

Official Form 106A/B Schedule A/B: Property page 6 Case 18-10262 Doc 1 Filed 04/09/18 Entered 04/09/18 12:13:36 Desc Main

Fill in this inform	mation to identify your	case:			
Debtor 1	Hursean M. McG	raw-Whitfield			
	First Name	Middle Name	Last Name	)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DI	VISION	
Case number (if known)					☐ Check if th
					amended

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
furniture Line from Schedule A/B. 6.1	\$750.00		\$750.00	735 ILCS 5/12-1001(b)
Life from Schedule A/D. 0.1			100% of fair market value, up to any applicable statutory limit	
iphone 6, 50" TV, HP Laptop, 2-32" TVs	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
wearing apparel	\$900.00		\$900.00	735 ILCS 5/12-1001(a)
Life from Schedule A/L 11.1			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B 16.1	\$7.00		\$7.00	735 ILCS 5/12-1001(b)
Enteriori Gonedale A/D. 10.1			100% of fair market value, up to any applicable statutory limit	
Wood Forest National Bank Line from Schedule A/B 17.1	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
LINE HOIN SCHEAUIE A/B. 17.1			100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own			Am	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	Chiicago Patrolmans Credit Union Line from Schedule A/B 17.2	\$50.00		\$50.00	735 ILCS 5/12-1001(b)		
	Zine nem conedule / V.Z. 1112			100% of fair market value, up to any applicable statutory limit			
	Chicago Patrolmans Credit Union Line from Schedule A/B 17.3	\$80.00		\$80.00	735 ILCS 5/12-1001(b)		
	2.110 11011 337,044.07 (2. 1110			100% of fair market value, up to any applicable statutory limit			
	CTA Pension	Unknown			735 ILCS 5/12-1006		
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			on or after the date of adjustment.)			
	Yes. Did you acquire the property covered No	by the exemption within	า 1,21	5 days before you filed this case?			

Yes

Case 18-10262 Doc 1 Filed 04/09/18 Entered 04/09/18 12:13:36 Desc Main Document Page 16 of 62 Fill in this information to identify your case: Debtor 1 Hursean M. McGraw-Whitfield Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured portion much as possible, list the claims in alphabetical order according to the creditor 's name. Do not deduct the that supports this value of collateral. claim Carmax Auto Finance Describe the property that secures the claim: \$18,616.00 \$15,000.00 \$3,616.00 Creditor's Name 2015 Nissan Altima 12800 Tuckahoe Creek As of the date you file, the claim is: Check all that Pkwy Richmond, VA ☐ Contingent 23238-1115 Number, Street, City, State & Zip Code ■ Unliquidated □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit ☐ Check if this claim relates to a Other (including a right to offset) community debt Date debt was incurred 2017-08 Last 4 digits of account number 5481 \$0.00 Loancare Servicing Ctr Describe the property that secures the claim: \$67,893.00 \$69,000.00 Creditor's Name 1496 Forest Ave. Calumet City. IL 60409-6241 3637 Sentara Way As of the date you file, the claim is: Check all that Virginia Beach, VA apply.

#### 23452-4262 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Nature of lien. Check all that apply. Who owes the debt? Check one. ☐ An agreement you made (such as mortgage or secured ■ Debtor 1 only Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Judgment lien from a lawsuit ☐ Check if this claim relates to a Other (including a right to offset) community debt

Date debt was incurred 2014-07

4455

Last 4 digits of account number

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Debtor 1 Hursean M. McGraw-W	Case number (f know)						
First Name Middle N	Name Last Name						
2.3 Regional Acceptance Co	Describe the property that secures the claim:	\$12,061.00	\$4,000.00	\$8,061.00			
Creditor's Name	2011 Hyundai Sonata						
304 Kellam Rd Virginia Beach, VA 23462-2712	As of the date you file, the claim is: Check all the apply.  ☐ Contingent	ıt					
Number, Street, City, State & Zip Code	Unliquidated						
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.						
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage o car loan)	r secured					
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)					
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit						
☐ Check if this claim relates to a community debt	Other (including a right to offset)						
Date debt was incurred 2010-11	Last 4 digits of account number 75	01					
If this is the last page of your form, add the Write that number here:  Part 2: List Others to Be Notified for	, •	\$98,570.00 \$98,570.00					
trying to collect from you for a debt you o	ne notified about your bankruptcy for a debt that towe to someone else, list the creditor in Part 1, ar t you listed in Part 1, list the additional creditors nis page.	nd then list the collection agency	/ here. Similarly, if you	ı have more			
Name, Number, Street, City, State & Carmax Auto Finance	Zip Code On	which line in Part 1 did you enter	the creditor? _2.1_				
Attn: Bankruptcy Departm PO Box 440609 Kennesaw, GA 30160-9511		st 4 digits of account number <u>54</u>	<u>81</u>				
Name, Number, Street, City, State & Fairway Independent/Loar 3637 Sentara Way	ncare	which line in Part 1 did you enter					
Virginia Beach, VA 23452-		<u> </u>					
Name, Number, Street, City, State & Regional Acceptance Co	Zip Code On	which line in Part 1 did you enter	the creditor? 2.3				
Attn: Bankruptcy 1424 E Fire Tower Rd Greenville, NC 27858-4105		st 4 digits of account number <b>75</b>	01_				

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O	430 10 10202 2	Documen	t Page 1	8 of 62	J.00 DCC	o man
Fill in this info	mation to identify your c			0.01		
Debtor 1	Hursean M. McGr	aw-Whitfield			7	
Debior 1	First Name	Middle Name	Last Name		}	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name	_		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS, EAS	TERN DIVISION		
Case number						
(if known)						heck if this is an
					a	mended filing
Official For	m 106F/F					
		ho Have Unsecur	od Claime			12/15
		Part 1 for creditors with PRI		Name O face and discuss with NO	NDDIODITY -I-:-	
e: Creditors Who he Continuation ase number (if k	Have Claims Secured by Pr Page to this page. If you hav nown).	red Leases (Official Form 106 operty. If more space is neede re no information to report in a	ed, copy the Part yo	ou need, fill it out, number t	he entries in the	boxes on the left. Attach
Part 1: List	All of Your PRIORITY Un	secured Claims				
<ol> <li>Do any credi</li> </ol>	tors have priority unsecured	d claims against you?				
No. Go to	Part 2.					
☐ Yes.						
Part 2: List	All of Your NONPRIORITY	/ Unsecured Claims				
	tors have nonpriority unsec	art. Submit this form to the court	with your other sche	edules.		
unsecured cla	aim, list the creditor separately	aims in the alphabetical order for each claim. For each claim st the other creditors in Part 3.If	listed, identify what t	ype of claim it is. Do not list of	claims already incl	uded in Part 1. If more
						Total claim
4.1 Acl Inc	C	Last 4 digits o	f account number	7785		\$93.00
Nonprior	ity Creditor's Name					
940 W	49th PI	When was the	debt incurred?	2015-10-27		<u>-</u>
	go, IL 60609-5151					
	Street City State Zlp Code	As of the date	you file, the claim	is: Check all that apply		
Who inc	urred the debt? Check one.					
■ Debt	or 1 only	☐ Contingent				
☐ Debt	or 2 only	☐ Unliquidate	d			
☐ Debt	or 1 and Debtor 2 only	☐ Disputed				
☐ At lea	ast one of the debtors and and	ther Type of NONP	RIORITY unsecure	d claim:		
☐ Ched	k if this claim is for a comn	nunity	ns			
debt	aim subject to offset?	<u> </u>		aration agreement or divorce	that you did not	
■ No		☐ Debts to pe	nsion or profit-sharir	ng plans, and other similar de	:bts	
☐ Yes		Other. Spec	cify Open acco	ount		

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Case number (f know)

Debtor 1 McGraw-Whitfield, Hursean M. 4.2 ADVOCATE MEDICAL GROUP. \$156.89 Last 4 digits of account number 7581 Nonpriority Creditor's Name When was the debt incurred? 8550 W Bryn Mawr Ave FI 8 Chicago, IL 60631-3200 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Advocate Trinity Hospital** Last 4 digits of account number 9641 \$26.75 Nonpriority Creditor's Name When was the debt incurred? 2320 E. 93RD ST. Chicago, IL 60617 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 **Amex Dsnb** Last 4 digits of account number 7393 \$3,751.00 Nonpriority Creditor's Name When was the debt incurred? 2014-04 9111 Duke Blvd Mason, OH 45040-8999 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes

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Case number (f know)

Debtor 1 McGraw-Whitfield, Hursean M. 4.5 \$464.00 AT&T Last 4 digits of account number 5831 Nonpriority Creditor's Name c/o Midland Bankruptcy Departm When was the debt incurred? 2014-03 5407 Andrews Hwy Midland, TX 79706 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Open account ☐ Yes 4.6 **Banfield Pet Hospital** Last 4 digits of account number 0483 \$158.00 Nonpriority Creditor's Name When was the debt incurred? 2016-01 8101 SE 6th Way Vancouver, WA 98683 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Open account 4.7 Last 4 digits of account number 0208 \$2,678.00 **Capital One** Nonpriority Creditor's Name 2011-08 When was the debt incurred? 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes

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Page 21 of 62 Case number (f know) Debtor 1 McGraw-Whitfield, Hursean M. 4.8 \$961.00 Capital One Bank Last 4 digits of account number 7331 Nonpriority Creditor's Name When was the debt incurred? 2017-09 **BANKRUPTCY DEPT 1680 Capital** One Drive McLean, VA 22102-3491 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Open account ☐ Yes 4.9 \$484.00 Chicago Patrolmans Fcu Last 4 digits of account number 0018 Nonpriority Creditor's Name When was the debt incurred? 2015-08 1407 W Washington Blvd Chicago, IL 60607-1820 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another  $\square$  Check if this claim is for a community ☐ Student loans debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other, Specify Revolving account 4.10 **COMCAST** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? P O BOX 3002 **SOUTHEASTERN, PA 19398-3002** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debtor 1 McGraw-Whitfield, Hursean M. **Laurels Apartments Forest City** \$919.00 4.14 Mqt Inc Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1251 S Michigan Ave Chicago, IL 60605-2609 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Judgment account opened Unknown ☐ Yes 4.15 **Levalon Properties LLC** Last 4 digits of account number \$3,745.00 0261 Nonpriority Creditor's Name When was the debt incurred? 2014-12 333 N Michigan Ave Ste 501 Chicago, IL 60601-3936 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another  $\square$  Check if this claim is for a community ☐ Student loans debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other, Specify Open account 4.16 **Mansards Apartments Lp** Last 4 digits of account number 2684 \$3,000.00 Nonpriority Creditor's Name When was the debt incurred? 1818 N Mansard Blvd Griffith, IN 46319-1362 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Judgment account opened 11/5/2014 ☐ Yes

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Debtor 1 McGraw-Whitfield, Hursean M. 4.17 \$285.00 **Midwest Training Ice Cntr** Last 4 digits of account number 5829 Nonpriority Creditor's Name When was the debt incurred? 2013-06-24 10600 White Oak Ave Dyer, IN 46311-3356 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Open account ☐ Yes 4.18 Last 4 digits of account number **Neurologic Associates Ltd** 9961 \$32.86 Nonpriority Creditor's Name When was the debt incurred? 11824 Southwest Hwy Palos Heights, IL 60463-1055 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.19 Last 4 digits of account number \$601.26 **Nicor Home Solutions** 4557 Nonpriority Creditor's Name When was the debt incurred? PO Box 5413 Carol Stream, IL 60197-5413 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Page 25 of 62 Case number (f know) Debtor 1 McGraw-Whitfield, Hursean M. 4.20 \$332.00 Syncb/Walmart Last 4 digits of account number 4611 Nonpriority Creditor's Name When was the debt incurred? 2014-01 PO Box 965024 Orlando, FL 32896-5024 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes 4.21 Synchrony Bank Last 4 digits of account number 4621 \$996.00 Nonpriority Creditor's Name When was the debt incurred? 2016-03 200 Crossing Blvd # 101 **Bridgewater**, NJ 08807-2876 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Open account 4.22 Last 4 digits of account number \$1,314.00 **Tbom-santander Consume** 3905 Nonpriority Creditor's Name When was the debt incurred? 2014-07 PO Box 961245 Fort Worth, TX 76161-0244 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes

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8014 Bayberry Rd Jacksonville, FL 32256-7412

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5831 Case 18-10262 Doc 1 Filed 04/09/18 Entered 04/09/18 12:13:36 Desc Main Page 27 of 62 Case number (f know) Document

Debtor 1 McGraw-Whitfield, Hursean M.

On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Erc/Enhanced Recovery Corp** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims 8014 Bayberry Rd Jacksonville, FL 32256-7412 Last 4 digits of account number 5831 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Fair Collections & Out Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 12304 Baltimore Ave Ste ■ Part 2: Creditors with Nonpriority Unsecured Claims Beltsville, MD 20705-1314 Last 4 digits of account number 0261 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Fair Collections & Outsourcing** Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept ■ Part 2: Creditors with Nonpriority Unsecured Claims 12304 Baltimore Ave Ste E Beltsville, MD 20705-1314 Last 4 digits of account number 0261 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Falls Collection Svc, Inc Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims N114W19225 Clinton Dr ■ Part 2: Creditors with Nonpriority Unsecured Claims Germantown, WI 53022-3015 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Finchtrl Svc** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **PO Box 668** ■ Part 2: Creditors with Nonpriority Unsecured Claims Germantown, WI 53022-0668 Last 4 digits of account number 7785 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Line 4.6 of (Check one): I C System Inc ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 64378 ■ Part 2: Creditors with Nonpriority Unsecured Claims Saint Paul, MN 55164-0378 Last 4 digits of account number 0483 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? I C System Inc ☐ Part 1: Creditors with Priority Unsecured Claims Line **4.6** of (Check one): 444 Highway 96 E ■ Part 2: Creditors with Nonpriority Unsecured Claims Saint Paul. MN 55127-2557 Last 4 digits of account number 0483 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Midland Funding Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2365 Northside Dr Ste 30 ■ Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92108-2709 Last 4 digits of account number 4543 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Midland Funding Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2365 Northside Dr Ste 300 Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92108-2709 Last 4 digits of account number 4543 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Funding ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.21 of (Check one): 2365 Northside Dr Ste 30 Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92108-2709 Last 4 digits of account number 4621 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Funding Line 4.21 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2365 Northside Dr Ste 300 ■ Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92108-2709 Last 4 digits of account number 4621

Official Form 106 E/F

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Debtor 1 McGraw-W	hitfield, Hursean M.		Case n	umber (f k	:now)
Name and Address		On which entry in Part 1 or Part 2 d	,	0	
Portfolio Recov As: 120 Corporate Blvd		Line 4.8 of (Check one):			ith Priority Unsecured Claims
Norfolk, VA 23502-4			■ Part 2: C	reditors wi	ith Nonpriority Unsecured Claims
,		Last 4 digits of account number	73	31	
Name and Address		On which entry in Part 1 or Part 2 d	lid you list the or	iginal credi	tor?
Portfolio Recov Ass		Line 4.13 of (Check one):	☐ Part 1: 0	reditors w	ith Priority Unsecured Claims
120 Corporate Blvd			■ Part 2: C	reditors w	ith Nonpriority Unsecured Claims
Norfolk, VA 23502-4	1952	Last 4 digits of account number	35	91	
Name and Address		On which entry in Part 1 or Part 2 d	lid you list the or	iginal credi	tor?
<b>Portfolio Recovery</b>		Line 4.8 of (Check one):		-	ith Priority Unsecured Claims
PO Box 41067			■ Part 2: 0	Creditors w	ith Nonpriority Unsecured Claims
Norfolk, VA 23541-1	1067	Last 4 digits of account number	73	31	
Name and Address		On which entry in Dort 1 or Dort 2 d	lid vav liat tha ar	iainal aradi	tor?
Name and Address Portfolio Recovery		On which entry in Part 1 or Part 2 d Line <b>4.13</b> of ( <i>Check one</i> ):			ith Priority Unsecured Claims
PO Box 41067		and <u>revo</u>			ith Nonpriority Unsecured Claims
Norfolk, VA 23541-1	1067	Last A disita of account country			arrivorphority offsecured oralling
		Last 4 digits of account number	35	i91 	
Name and Address		On which entry in Part 1 or Part 2 d	·	•	
Region Recov		Line <b>4.17</b> of ( <i>Check one</i> ):			ith Priority Unsecured Claims
5252 Hohman Ave Hammond, IN 46320	0-1723		Part 2: 0	creditors w	ith Nonpriority Unsecured Claims
	20	Last 4 digits of account number	58	329	
Name and Address		On which entry in Part 1 or Part 2 d	lid you list the or	iginal credi	tor?
Santander Consum	er USA	Line 4.22 of (Check one):	☐ Part 1: C	reditors w	ith Priority Unsecured Claims
PO Box 961245	24 0244		Part 2: 0	reditors w	ith Nonpriority Unsecured Claims
Fort Worth, TX 7616	01-0244	Last 4 digits of account number	39	05	
Name and Address		On which entry in Part 1 or Part 2 d	lid vou list the or	iginal credi	tor?
Synchrony Bank/W		Line <b>4.20</b> of ( <i>Check one</i> ):		-	ith Priority Unsecured Claims
Attn: Bankruptcy D	ept		Part 2: 0	Creditors w	ith Nonpriority Unsecured Claims
PO Box 965060 Orlando, FL 32896-	5060				
Oriando, FL 32090-	3000	Last 4 digits of account number	46	611	
Name and Address		On which entry in Part 1 or Part 2 d	lid you list the or	iginal credi	tor?
US Dept of Ed		Line <b>4.23</b> of ( <i>Check one</i> ):	·	-	ith Priority Unsecured Claims
Attn: Bankruptcy			Part 2: C	Creditors w	ith Nonpriority Unsecured Claims
2401 International L					
Madison, WI 53704-	3121	Last 4 digits of account number	75	81	
Name and Address		On which entry in Part 1 or Part 2 d	lid you list the or	iginal credi	tor?
Visa Dept Store Nat	tional	Line 4.12 of (Check one):	·	-	ith Priority Unsecured Claims
Bank/Macy's			Part 2: C	Creditors w	ith Nonpriority Unsecured Claims
Attn: Bankruptcy					,
PO Box 8053 Mason, OH 45040-8	053				
		Last 4 digits of account number	07	'10	
Part 4: Add the Amo	ounts for Each Type of U	Insecured Claim			
	ertain types of unsecured cl		tical reporting p	ourposes o	only. 28 U.S.C. §159. Add the amounts for ea
					Total Claim
	Domestic support obligatio	ns	6a.	\$	0.00
Total claims from Part 1 6b.	Taxes and certain other dek	ots you owe the government	6b.	\$	0.00

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0.00

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#### Debtor 1 McGraw-Whitfield, Hursean M. Claims for death or personal injury while you were intoxicated 6c. 0.00 Other. Add all other priority unsecured claims. Write that amount here. 6d. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f. Student loans 6f. 0.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that 6g. 0.00 6g. you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount 31,976.76 Total Nonpriority. Add lines 6f through 6i. 6j. 31,976.76

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		DUGIIIIE		
Fill in this infor	mation to identify your	case:		
Debtor 1	Hursean M. McG	raw-Whitfield		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	١
Case number (if known)				

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				<del>_</del>
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				<del>_</del>
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				<del></del>
	Number	Street			_
	City		State	ZIP Code	<del>_</del>

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Fill in this i	information to identify your	case:		
Debtor 1	Hursean M. McG	raw-Whitfield		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name	
	•			
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERI	N DIVISION
Case numb	er			
(if known)				☐ Check if this is an
				amended filing
Official	Form 106H			
	ule H: Your Cod	ahtars		12/15
Scrieu	ule II. Toul Cou	CDIOI 3		12/15
■ No □ Yes  2. With Califorr ■ No. □ Yes.	nia, Idaho, Louisiana, Nevada Go to line 3. Did your spouse, former spou	I <b>lived in a community pro</b> New Mexico, Puerto Rico, se, or legal equivalent live w	perty state or territory Texas, Washington, and ith you at the time?	? (Community property states and territories include Arizona,
line 2 a 106D), Colum	again as a codebtor only if the Schedule E/F (Official Form n 2.	nat person is a guarantor	or cosigner. Make sure	you have listed the creditor on Schedule D (Official Form e Schedule D, Schedule E/F, or Schedule G to fill out
_	Column 1: Your codebtor lame, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
[3.1]	Name			Schedule D, line
				☐ Schedule E/F, line
_				- Scriedule S, inic
	Number Street City	State	ZIP Code	
	,			
				Cohodulo D. lino
3.2	Name			_ □ Schedule D, line □ Schedule E/F, line
				☐ Schedule E/F, line
_	Number Street			<u> </u>
	City	State	ZIP Code	

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Fill	in this information to identify your ca	se:								
		McGraw-Whitfield								
	otor 2				_					
Uni	ted States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS, EAS	STERN						
(If kr	se number Jown)					Check if this is:  An amended  A supplemed income as o	nt sho	wing po	•	chapter 13
-	fficial Form 106l					MM / DD/ Y	YYY			
	chedule I: Your Inco									12/15
spo	Fill in your employment	spouse is not filing with	h you, do not includ	e inform	atio	about your spous	se. If nown).	nore sp Answe	pace is need r every qu	eded,
	information.					☐ Emplo		II-IIIIII	spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			☐ Not er	•	∍d		
	employers.	Occupation	driver							
	Include part-time, seasonal, or self-employed work.	Employer's name	СТА							
	Occupation may include student or homemaker, if it applies.	Employer's address	1702 E 103rd St Chicago, IL 606		2					
		How long employed th	ere? <u>10 yea</u> ı	rs						
Par	t 2: Give Details About Mont	hly Income								
	mate monthly income as of the dat ss you are separated.		ou have nothing to rep	ort for an	y line	e, write \$0 in the spa	ce. Ind	lude yc	our non-filin	ng spouse
If yo spac	u or your non-filing spouse have more e, attach a separate sheet to this form	than one employer, comb	oine the information fo	r all empl	oyers	s for that person on t	he line	s below	v. If you ne	ed more
						For Debtor 1		Debtor -filing	r 2 or spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	5,236.90	\$_		N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.00	+\$		N/A	
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$	5,236.90	\$		N/A	

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Debto	or 1	McGraw-Whitfield, Hursean M.	_	Cas	se number (if known	)	
				F	or Debtor 1		For Debtor 2 or non-filing spouse
	Cop	by line 4 here	4.	\$	5,236.90		N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	567.80	) 9	\$ N/A
	5b.	Mandatory contributions for retirement plans	5b.		0.00	_	\$ N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	_	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	_	N/A
	5e.	Insurance	5e.	\$	1,439.66	5	\$ N/A
	5f.	Domestic support obligations	5f.	\$	0.00	_	\$ N/A
	5g.	Union dues	5g.	\$	146.42	<u> </u>	\$ N/A
	5h.	Other deductions. Specify: fCU Limints Garage	5h	+ \$	216.67	7 + 9	\$ <b>N/A</b>
		fCU Beverly Garage		\$	541.67	7 9	\$ <b>N/A</b>
		fCU 52nd St Garage		\$	21.67	7 9	\$ <b>N/A</b>
		Aflac Disabilty		\$	85.67	7 9	N/A_
		Aflac Accident		\$	35.49	9 9	<b>N/A</b>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$.	3,055.05	5_ \$	N/A_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$.	2,181.85	5_ \$	N/A_
	8b. 8c. 8d. 8e. 8f.	Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8a. 8b. 8c. 8d. 8e.	٠.	0.00 0.00 0.00 0.00	<u>)</u> 9	5 N/A N/A N/A N/A N/A
	_	Specify:	8f.	\$	0.00	_	N/A
	8g.	Pension or retirement income	8g.	\$	0.00		N/A
	8h.	Other monthly income. Specify:	8h	+ \$	0.00	) + 5	N/A
9.	Ado	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00		N/A
		culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	S	2,181.85 +	\$	N/A = \$ 2,181.85
	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your dear friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not available.	epender				hedule J. 11. +\$ <b>0.00</b>
		I the amount in the last column of line 10 to the amount in line 11. The resulte that amount on the Summary of Schedules and Statistical Summary of Certain					
		you expect an increase or decrease within the year after you file this form?  No.			<del></del>		Combined monthly income
		No. Yes. Explain:					

Fill	in this information to identify your case:				
Deb	tor 1 Hursean M. McGraw-Whitfield		Chec	k if this is:	
Deb	tor 2	_	_	An amended filing A supplement show	ing postpetition chapter 13
(Spo	buse, if filing)			expenses as of the t	
Unit	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING	OIS,	-	MM / DD / YYYY	
	e numbernown)				
	fficial Form 106J				
	chedule J: Your Expenses	Climate and an head are	11		12/15
info (if k	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fo known). Answer every question.				
Par 1.	t1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?				
	□ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses f	or Separate Householdo	of Debtor	2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationsh Debtor 1 or Debtor 2	hip to	Dependent's age	Does dependent live with you?
	Do not state the				□No
	dependents names.	Daughter		15	■ Yes
					□ No □ Yes
					□ res □ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?   ■ No □ Yes				
exp	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a supple blicable date.				
valı	lude expenses paid for with non-cash government assistance if y ue of such assistance and have included it on Schedule I: Your lificial Form 1061.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage	4. \$		0.00
	If not included in line 4:				
			40 0		2.22
	<ul><li>4a. Real estate taxes</li><li>4b. Property, homeowner's, or renter's insurance</li></ul>		4a. \$ 4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as hom	ne equity loans	5. \$		0.00

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6.   Water, sewer, garbage collection   6.   \$   0.00     6.   Telephone, cell phone, Internet, satellite, and cable services   6.   \$   0.00     6.   Cheer, Specify;   64   \$   0.00     7.   Food and housekeeping supplies   7.   \$   0.00     8.   \$   0.00     9.   Children's education costs   10.   \$   0.00     10.   Personal care products and services   10.   \$   0.00     10.   Medical and dental expenses   11.   \$   0.00     11.   Transportation, Include gas, maintenance, bus or train fare.   0.00     12.   Transportation, Include gas, maintenance, bus or train fare.   0.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$   0.00     15.   Insurance.   0.00     15.   Lealt in insurance   15.   \$   0.00     15.   Lealt in insurance   15.   \$   0.00     15.   Lealt in insurance   15.   \$   0.00     15.   Vehicle insurance, Specify   15.   \$   0.00     16.   Taxes, Do not include stace deducted from your pay or included in lines 4 or 20.     15.   Specify   15.   \$   0.00     17.   Care payments for Vehicle 1   17a.   \$   0.00     17.   Care payments for Vehicle 1   17a.   \$   0.00     17.   Cheer, Specify   17.   0.00     18.   Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on lines 4, or 5 of this form or on Schedule 1.   Your Income (Official Form 106i),   0.00     18.   Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i),   0.00     18.   Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official F	Debt	or 1 <u>McGraw</u>	-Whitfield, Hursean M. Ca	ise num	ber (if known)	
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellile, and cable services 6c. Telephone, cell phone, Internet, satellile, and cable services 6c. Telephone, cell phone, Internet, satellile, and cable services 6c. S. 0.00 6c. Telephone, cell phone, Internet, satellile, and cable services 6c. S. 0.00 7. Food and housekeeping supplies 7. S. 0.00 8. Childcare and children's education costs 9. S. 0.00 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. S. 0.00 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 14. Charitable contributions and religious donations 15. Insurance. 15a. Life insurance 15b. Health insurance 45b. \$0.00 15c. Vehicle insurance 55c. \$0.00 15d. Other insurance. Specify: 15d. \$0.00 17c. Other. Specify: 17c. \$0.00 17d. Other. Specify: 17d. \$0.00 17d. Other payments for Vehicle 2 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 17d. Other specify: 17d. \$0.00 17d. Other payments for Vehicle 2 17d. \$0.00 17d. Other specify: 17d. \$0.00 17d. Other payments for Vehicle 2 17d. \$0.00 17d. Other specify: 17d. \$0.00 17d. Other specify: 17d. \$0.00 17d. Other payments for vehicle 1 10d. \$0.00 17d. Other payments for vehicle 2 10d. \$0.00 17d. Other payments of the property of the payment of the property of the payment of vehicle 1 10d. \$0.00 17d. Other payments of the property of t	6	l Itilities:				
Beb. Water, sewer, garbage collection   6c. Telephone, cell phone, Intermet, satellite, and cable services   6c.   5.00	-		heat, natural gas	6a.	\$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. Other. Specify: 7. Food and housekeeping supplies 7. \$ 0.00 8. Childcare and children's education costs 8. \$ 0.00 9. Clothing, laundry, and dry cleaning 9. \$ 0.00 10. Personal care products and services 11. Medical and dental expenses 11. \$ 0.00 11. Medical and dental expenses 11. \$ 0.00 11. Medical and dental expenses 11. \$ 0.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Use and the surance of the surance		•	•			
6 d. Other. Specify:  7 Food and housekeeping supplies  8 Childcare and children's education costs  8 \$ 0.00  9 Clothing, laundry, and dry cleaning  9 \$ \$ 0.00  10 Personal care products and services  11 \$ 0.00  11 Medical and dental expenses  11 \$ 0.00  12 Transportation. Include gas, maintenance, bus or train fare.  12 Do not include anyments.  13 Entertainment, clubs, recreation, newspapers, magazines, and books  13 Entertainment, clubs, recreation, newspapers, magazines, and books  14 \$ 0.00  15 Insurance.  16 Life insurance adducted from your pay or included in lines 4 or 20.  15 Insurance.  15 Do not include insurance deducted from your pay or included in lines 4 or 20.  15 Life insurance  15 0.00  15 0.00  15 0.00  15 1.00  16 Taxes. Do not include saxe adducted from your pay or included in lines 4 or 20.  Specify:  16 Taxes Do not include saxe adducted from your pay or included in lines 4 or 20.  Specify:  17 La Car payments for Vehicle 1  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Cherr. Specify:  17d. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on lines 4. or 5 of this form or on Schedule! Your Income (Official Form 106).  18 Specify:  19. Other reapments on the property  20a. Maintenance, repair, and upkeep expenses  20b. Specify:  20c. Homeowner's association or condominium dues  20c. Specify:  21c. Add lines 4 through 21.  22c. Add lines 4 through 21.  23a. Copy jour monthly expenses from line 22c above.  23b. Subtract your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from line 22c above.  23d. Subtract your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from line 22c above.  23c. Subtract your monthly expenses fr					·	
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10.   Personal care products and services						
11.   Medical and dental expenses		-				
12. Transportation. Include gas, maintenance, bus or train fare.		•			· —	
Do not include car payments 12. \$ 0.00  13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00  14. Charitable contributions and religious donations 14. \$ 0.00  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00  15b. Health insurance 15c. \$ 0.00  15c. Vehicle insurance 15c. \$ 0.00  15d. Other insurance. Specify: 15d. \$ 0.00  15d. Other insurance. Specify: 15d. \$ 0.00  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00  17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00  17b. Car payments for Vehicle 1 17a. \$ 0.00  17c. Other. Specify: 17c. Other. Specify: 17c. \$ 0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.00  18. Your payments of unke to support others who do not live with you. \$ 0.00  Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00  20b. Real estate taxes 20b. \$ 0.00  20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00  20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00  20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00  20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00  21. Other: Specify: 21. +\$ 0.00  22. Calculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 0.00  23c. Calculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 0.00  23c. Subtract your monthly expenses from line 22c above. 23d. \$ 0.00  23c. Subtract your monthly expenses from your monthly income. 23d. Copy your monthly expenses from your monthly income. 23d. Copy your monthly expenses from your monthly income. 23d. Copy your monthly expenses from your monthly income. 23d. Subtract your monthly expenses from your monthly income. 23d.			•	11.	<b>—</b>	0.00
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14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 18. Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20c. Property, homeowner's association or condominium dues 20e. \$ 0.00 20c. Property, homeowner's association or condominium dues 20e. \$ 0.00 20c. Property, homeowner's association or condominium dues 20e. \$ 0.00 20c. Property, homeowner's association or condominium dues 20e. \$ 0.00 20c. Property, homeowner's association or condominium dues 20e. \$ 0.00 20c. Property, homeowner's or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Property, homeowner's or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Property, homeowner's or renter's insurance 20d. Maintenance, r	13		• •		·	
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15a. Life insurance       15a. \$       0.00         15b. Health insurance       15b. \$       0.00         15c. Vehicle insurance       15c. \$       0.00         15d. Other insurance. Specify:       15d. \$       0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:       16. \$       0.00         17. Installment or lease payments:       17a. \$       0.00         17c. Car payments for Vehicle 1       17a. \$       0.00         17c. Other. Specify:       17c. \$       0.00         17d. Other. Specify:       17d. \$       0.00         17d. Other. Specify:       17d. \$       0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106).       18. \$       0.00         19. Other payments you make to support others who do not live with you.       \$       0.00         19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.       20a. \$       0.00         20a. Mortgages on other property       20a. \$       0.00       0.00         20b. Property, homeowner's, or renter's insurance       20b. \$       0.00       0.00         20c. Property, homeowner's association or condominium dues       20e. \$       0.00	-		surance deducted from your pay or included in lines 4 or 20			
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		The result	is your monthly net income.	23c.	\$	2,181.85
24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage?  No.		Do you expect a For example, do yo modification to the	an increase or decrease in your expenses within the year after you file ou expect to finish paying for your car loan within the year or do you expect your mo	e this f	form?	
☐ Yes. Explain here:			Explain here:			

modification to the t	enns of your mortgage:
■ No.	
☐ Yes.	Explain here:

Fill in this inform	nation to identify your	case:			
Debtor 1	Hursean M. McGraw-Whitfield				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS, EASTER	RN DIVISION	
Case number					
(if known)					Check if this is an amended filing
Official Form					
Declarat	ion About a	an Individua	al Debtor's S	Schedules	12/15
If two married pe	ople are filing together	, both are equally resp	onsible for supplying co	rrect information.	
You must file this	form whenever you fi	le bankruptcy schedule	s or amended schedule:	s. Making a false stateme	ent, concealing property, or
obtaining money	or property by fraud in U.S.C. §§ 152, 1341, 1	n connection with a bar	nkruptcy case can result	in fines up to \$250,000,	or imprisonment for up to 20
yours, or boun 10	0.0.0. 33 102, 1041, 1	515, and 5571.			
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an atto	orney to help you fill out	hankruntov forme?	
J , , , , , , , , , , , ,	e. agree to pay come		moy to notp you iii out	bankruptcy forms:	
■ No					
Yes. N	lame of person Attach Bankruptcy Petition Preparer's No.				uptcy Petition Preparer's Notice,
			Declaration, and Signature (Official Form 119)		
Under penalt	ty of perjury, I declare true and correct.	that I have read the sur	nmary and schedules file	ed with this declaration a	and
1/ N					
( ×)	h M. McGraw-Whitf	iold	X Signature	of Debtor 2	
	e of Debtor 1	ICIU	Signature	oi Deuloi 2	
Date A	nril & 2019		Date		

Case 18-10262 Doc 1 Filed 04/09/18 Entered 04/09/18 12:13:36 Desc Main

		Documei	nt Page 37 of 62	
Fill in this inform	nation to identify your	case:		
Debtor 1	Hursean M. McG	raw-Whitfield		
	First Name	Middle Name	Last Name	)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	ON
Case number				☐ Check if this is an amended filing

## Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	sets what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	69,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	21,687.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	90,687.00
Pai	t 2: Summarize Your Liabilities		
		Your lia	<b>abilities</b> you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	98,570.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	31,976.76
	Your total liabilities	\$	130,546.76
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oschedule I	\$	2,181.85
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	0.00
Pai	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedul	es.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a p purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, fam	ily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this ha	ov and suhm	nit this form to the

court with your other schedules.

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Debtor 1 McGraw-Whitfield, Hursean M. Document Page 38 of 62 Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Bort 4 on Colombia E/E against a fall and an	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Fil	l in this informa	ation to identify you	r case:			
De	ebtor 1	Hursean M. McG	Graw-Whitfield  Middle Name	Last Name	<del></del>	
De	ebtor 2	rust Name	Middle Name	Last Hallid		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name	7	
Un	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS, EASTERN DIV	ISION	
Ca	se number					
(if k	(nown)		· · · · · · · · · · · · · · · · · · ·			Check if this is an amended filing
L						amended ming
<u>O</u> :	fficial For	m 107				
_			Affairs for Individ	duals Filing for B	ankruptcy	4/10
			ole. If two married people ar	<del>_</del>		
info	ormation. If mo		attach a separate sheet to the			
_	<u> </u>	• •	water of the control	A forest Defense		
Pa	Give De	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	■ Married					
	☐ Not marri	ed				
2.	During the las	st 3 years, have you	lived anywhere other than v	vhere you live now?		
	□ No					
	Yes. List	all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now.		
	Debtor 1 Price	or Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2
	1734 Dylan Griffith, IN	e Dr 46319-1481	From-To: <b>07/2013 to</b>	☐ Same as Debtor	1	Same as Debtor 1 From-To:
			07/2015			
	es and territorie: No Yes. Mak	s include Arizona, Cal	ver live with a spouse or legifornia, Idaho, Louisiana, Nevelegifornia, Idaho, Louisiana, Nevelegifornia, Idaho, Louisiana, Nevelegifornia, Idaho, Louisiana, Idaho, Idaho	ada, New Mexico, Puerto Ri		
4.			nployment or from operating u received from all jobs and a			ndar years?
			nave income that you receive to			
	□ No					
	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$20,711.72	☐ Wages, commissions, bonuses, tips	•
			☐ Operating a business		☐ Operating a business	

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Debtor 1 McGraw-Whitfield, Hursean M.		Case number(if known)		
	Debtor 1		Debtor 2	
,	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	☐ Wages, commissions, bonuses, tips	\$1,391.69	☐ Wages, commissions, bonuses, tips	
	Operating a business		Operating a business	
For last calendar year: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$56,495.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$996.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$55,294.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
List each source and the gross inco  No Yes. Fill in the details.	ome from each source separately	y. Do not include income that	you listed in line 4.	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2017)	Pension Distribution	\$2,249.00		`
For the calendar year before that: (January 1 to December 31, 2016)	Pension Distribution	\$4,393.00		
Part 3: List Certain Payments You	u Made Before You Filed for E	Bankruptcy	·	
	2's debts primarily consumer Debtor 2 has primarily consur a personal, family, or household (	mer debts. Consumer debts	are defined in 11 U.S.C. § 101	(8) as "incurred by an
During the 90 days bef $\Box$ No. Go to line	ore you filed for bankruptcy, did 7.	you pay any creditor a total of	\$6,425* or more?	
☐ Yes List below creditor. Depayments	each creditor to whom you paid Do not include payments for don to an attorney for this bankruptont on 4/01/19 and every 3 years a	nestic support obligations, su y case.	ch as child support and alimo	

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De	ptor 1 M	cGraw-Wh	ittield, Hursean M		Cas	e number(# known)		
	■ Yes.			ave primarily consumer de ed for bankruptcy, did you pa		\$600 or more?		
		■ No.	Go to line 7.					•
		□ Yes	List below each cred	litor to whom you paid a total stic support obligations, such s.				
	Creditor	's Name and	l Address	Dates of payment	Total amount paid	Amount you still owe	Was this paym	ent for
7.	Insiders in which you	iclude your re are an office	elatives; any general particular, director, person in o	otcy, did you make a paym artners; relatives of any gener control, or owner of 20% or mo U.S.C. § 101. Include paymo	al partners; partnership ore of their voting secu	ps of which you are rities; and any man	a general partner; aging agent, includ	ling one for a
	■ No □ Yes.	List all paym	ents to an insider.		<b>-</b> .			
	Insider's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	payment
8.	insider?		you filed for bankrupebts guaranteed or co	otcy, did you make any pay signed by an insider	rments or transfer an	ny property on ac	count of a debt th	at benefited an
	■ No	List all paym	ents to an insider					
		Name and		Dates of payment	Total amount paid	Amount you still owe	Reason for this	
Pa	t 4: Ide	ntify Legal A	Actions. Repossessi	ons, and Foreclosures	•			
9.	Within 1	year before	you filed for bankru	ptcy, were you a party in a y cases, small claims actions	ny lawsuit, court action, divorces, collection s	on, or administrat uits, paternity action	tive proceeding?	ody modifications,
	□ No						•	
	■ Yes.	Fill in the de	etails.					
	Case titl			Nature of the case	Court or agency		Status of the ca	ase
	Hursea 2008D0		arryl Robinson	child support ·	Circuit Court C County	Court of Cook	■ Pending □ On appeal □ Concluded	
10.			you filed for bankru	ptcy, was any of your prop low.	erty repossessed, fo	reclosed, garnish	ed, attached, seiz	zed, or levied?
	_	Go to line 11 Fill in the inf	ormation below.					
	Creditor	Name and	Address	Describe the Property		Date	•	Value of the
				Explain what happene	ed			property
11.	accounts			uptcy, did any creditor, inc ecause you owed a debt?	cluding a bank or fina	ancial institution,	set off any amou	nts from your
	_ '''	Fill in the de	etails.					
		Name and		Describe the action th	e creditor took	Date taker	action was	Amount
								-

Entered 04/09/18 12:13:36 Case 18-10262 Doc 1 Filed 04/09/18 Document Page 42 of 62 Debtor 1 McGraw-Whitfield, Hursean M. Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Dates you gave Value the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο ☐ Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you □ No Yes, Fill in the details. Description and value of any property Date payment or Amount of transferred transfer was payment

#### Part 7: List Certain Payments or Transfers

consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

Person Who Was Paid **Address Email or website address** made Person Who Made the Payment, if Not You

Heller & Richmond, Ltd. 33 N Dearborn St Ste 1907 Chicago, IL 60602-3828

0.00

2/28/18

\$750.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Del	otor 1	McGraw-Whitfield, Hursean M.		Case nun	nber(if known)	
	inclu	sferred in the ordinary course of your be de both outright transfers and transfers ma and transfers that you have already listed of	ade as security (such as the granting	g of a security inter	est or mortgage on your pro	operty). Do not include
	_	No				
	Pers	Yes. Fill in the details. son Who Received Transfer Iress	Description and value of property transferred	paym	ribe any property or nents received or debts	Date transfer was made
	Pers	son's relationship to you		paid	in exchange	
19.		in 10 years before you filed for bankrup		ty to a self-settled	d trust or similar device o	of which you are a
	_	No				
	_	Yes. Fill in the details. ne of trust	Description and value of	he property trans	sferred	Date Transfer was
						made
Par	t 8:	List of Certain Financial Accounts, In	struments, Safe Deposit Boxes, a	nd Storage Units	;	
20.	sold, Inclu	in 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, o es, pension funds, cooperatives, asso	or other financial accounts; certif	icates of deposit;	•	
		No				
		Yes. Fill in the details.	_	_		
		ne of Financial Institution and Iress (Number, Street, City, State and ZIP )	Last 4 digits of Type of account number instru	of account or ment	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.		ou now have, or did you have within 1 , or other valuables?	year before you filed for bankrup	tcy, any safe dep	osit box or other deposi	tory for securities,
		No				
		Yes. Fill in the details.	•			
		ne of Financial Institution  ress (Number, Street, City, State and ZIP Code)	Who else had access to it Address (Number, Street, City, and ZIP Code)		the contents	Do you still have it?
22.	Have	you stored property in a storage unit	or place other than your home w	ithin 1 year befor	e you filed for bankrupto	y?
		No				
		Yes. Fill in the details.				
		ne of Storage Facility Iress (Number, Street, City, State and ZIP Code)	Who else has or had acce to it? Address (Number, Street, City, and ZIP Code)		the contents	Do you still have it?
Par	t 9:	Identify Property You Hold or Contro	I for Someone Else			
23.	•	ou hold or control any property that so	omeone else owns? Include any p	roperty you borr	owed from, are storing fo	or, or hold in trust for
		No				
		Yes. Fill in the details.				
		ner's Name Iress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and 2 Code)		the property	Value
Par	t 1 <u>0:</u>	Give Details About Environmental Inf	formation			
			· · · · · · · · · · · · · · · · · · ·			
ror	rue bi	urpose of Part 10, the following definiti	ons apply:			

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations

Official Form 107

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De	btor 1	McGraw-Whitfield, Hursean M	1.	Case n	number (if known)	
	cont	olling the cleanup of these substance	ces, wastes, or material.			
	and mount and recording to a common and a co					
	•	operate, or utilize it, including disportance of the control of th		azardane waeta. h	azardoue cubetanoo tovio	cubetanos bazardous
_		rial, pollutant, contaminant, or simila		iazardous waste, ir	azai dous substance, toxic	· · · · · · · · · · · · · · · · · · ·
Rep	ort all	notices, releases, and proceedings	that you know about, regardles	s of when they occ	urred.	•
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
		No				
	_	Yes. Fill in the details.				
	Nan	e of site	Governmental unit	En	vironmental law, if you	Date of notice
	Add	ress (Number, Street, City, State and ZIP Code	a) Address (Number, Street, ZIP Code):	City, State and kno	ow it	
25.	Have	you notified any governmental unit	of any release of hazardous ma	nterial?		
		No				
		Yes. Fill in the details.				
		e of site	Governmental unit		vironmental law, if you	Date of notice
	Add	ress (Number, Street, City, State and ZIP Code	e) Address (Number, Street, ZIP Code)	City, State and Kno	ow it	
26.	Have	you been a party in any judicial or a	administrative proceeding unde	r any environment	al law? Include settlements	and orders.
		Νο				
	_	Yes. Fill in the details.				
		e Title	Court or agency	Nature	of the case	Status of the
	Cas	e Number	Name   Address (Number, Street,	City, State		case
			and ZIP Code)			
Pai	rt 11:	Give Details About Your Business	or Connections to Any Busines	s		
27.	With	n 4 years before you filed for bankru	uptcy, did you own a business o	or have any of the f	following connections to a	ny business?
		☐ A sole proprietor or self-employe	ed in a trade, profession, or othe	er activity, either fu	II-time or part-time	
		A member of a limited liability co	mpany (LLC) or limited liability	partnership (LLP)		
		☐ A partner in a partnership				
		An officer, director, or managing	executive of a corporation			
		lacksquare An owner of at least 5% of the vol	ting or equity securities of a co	rporation		
		No. None of the above applies. Go to	o Part 12.			
		Yes. Check all that apply above and	fill in the details below for each	business.		
		iness Name	Describe the nature of the		mployer Identification num	
		ress ber, Street, City, State and ZIP Code)	Name of accountant or bo		o not include Social Secur	ity number or ITIN.
				D	ates business existed	
28.		in 2 years before you filed for bankru utions, creditors, or other parties.	uptcy, did you give a financial s	tatement to anyon	e about your business? Ind	clude all financial
		No				
		Yes. Fill in the details below.				
	Nan	ne ress	Date Issued			
		ber, Street, City, State and ZIP Code)				
Pa	rt 12:	Sign Below				

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 McGraw-Whitfield	I, Hursean M.	Case number(if known)
bankruptcy/case can result in fil 18 U.S.C. §§ 152, 1341, 1549, and	nes <u>up to \$25</u> 0,000, or imprisonment for up to <del>1 357</del> 1.	20 years, or both.
Hursean W. VicGraw-Whitfi Signature of Debtor 1	eld Signature of Debto	or 2
Date April 5, 2018	Date	
Did you attach additional pages ■ No □ Yes	to Your Statement of Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay som ■ No	neone who is not an attorney to help you fill o	ut bankruptcy forms?
☐ Yes. Name of Person	Attach the Bankruptcy Petition Preparer's Notice	Declaration, and Signature (Official Form 119)

Acl Inc 840 W 49th Pl Chicago, IL 60609-5151

ADVOCATE MEDICAL GROUP, 8550 W Bryn Mawr Ave Fl 8 Chicago, IL 60631-3200

Advocate Trinity Hospital 2320 E. 93RD ST. Chicago, IL 60617

Alliance One 4850 E Street Rd Ste 300 Trevose, PA 19053-6643

Amex Correspondence PO Box 981540 El Paso, TX 79998-1540

Amex Dsnb 9111 Duke Blvd Mason, OH 45040-8999

AT&T c/o Midland Bankruptcy Departm 5407 Andrews Hwy Midland, TX 79706 Banfield Pet Hospital 8101 SE 6th Way Vancouver, WA 98683

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Capital One 15000 Capital One Dr Richmond, VA 23238-1119

Capital One Bank
BANKRUPTCY DEPT 1680 Capital One Drive
McLean, VA 22102-3491

Carmax Auto Finance 12800 Tuckahoe Creek Pkwy Richmond, VA 23238-1115

Carmax Auto Finance Attn: Bankruptcy Department PO Box 440609 Kennesaw, GA 30160-9511

Chgo Pm Cu 1407 W Washington Blvd Chicago, IL 60607-1820 Chicago Patrolmans Fcu 1407 W Washington Blvd Chicago, IL 60607-1820

COMCAST P O BOX 3002 SOUTHEASTERN, PA 19398-3002

Comenity Bank PO Box 659728 San Antonio, TX 78265-9728

Dsnb Macys PO Box 8218 Mason, OH 45040-8218

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256-7412

Erc/Enhanced Recovery Corp Attn: Bankruptcy 8014 Bayberry Rd Jacksonville, FL 32256-7412

Fair Collections & Out 12304 Baltimore Ave Ste Beltsville, MD 20705-1314 Fair Collections & Outsourcing Attn: Bankruptcy Dept 12304 Baltimore Ave Ste E Beltsville, MD 20705-1314

Fairway Independent/Loancare 3637 Sentara Way Virginia Beach, VA 23452-4262

Falls Collection Svc, Inc N114W19225 Clinton Dr Germantown, WI 53022-3015

Finchtrl Svc PO Box 668 Germantown, WI 53022-0668

Hsbc Bank Nevada N.A. 1111 N Town Center Dr Las Vegas, NV 89144-6364

I C System Inc PO Box 64378 Saint Paul, MN 55164-0378

I C System Inc 444 Highway 96 E Saint Paul, MN 55127-2557 Laurels Apartments~ Forest City Mgt Inc 1251 S Michigan Ave Chicago, IL 60605-2609

Levalon Properties LLC 333 N Michigan Ave Ste 501 Chicago, IL 60601-3936

Loancare Servicing Ctr 3637 Sentara Way Virginia Beach, VA 23452-4262

Mansards Apartments Lp 1818 N Mansard Blvd Griffith, IN 46319-1362

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108-2709

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108-2709

Midwest Training Ice Cntr 10600 White Oak Ave Dyer, IN 46311-3356 Neurologic Associates Ltd 11824 Southwest Hwy Palos Heights, IL 60463-1055

Nicor Home Solutions PO Box 5413 Carol Stream, IL 60197-5413

Portfolio Recov Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502-4952

Portfolio Recovery PO Box 41067 Norfolk, VA 23541-1067

Region Recov 5252 Hohman Ave Hammond, IN 46320-1723

Regional Acceptance Co Attn: Bankruptcy 1424 E Fire Tower Rd Greenville, NC 27858-4105

Regional Acceptance Co 304 Kellam Rd Virginia Beach, VA 23462-2712 Santander Consumer USA PO Box 961245 Fort Worth, TX 76161-0244

Syncb/Walmart PO Box 965024 Orlando, FL 32896-5024

Synchrony Bank 200 Crossing Blvd # 101 Bridgewater, NJ 08807-2876

Synchrony Bank/Walmart Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060

Tbom-santander Consume PO Box 961245 Fort Worth, TX 76161-0244

US Dept of Ed Attn: Bankruptcy 2401 International Ln Madison, WI 53704-3121

US Dept of Ed/Glelsi PO Box 7860 Madison, WI 53707-7860 Visa Dept Store National Bank/Macy's Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053

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## United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:	Case No.
McGraw-Whitfield, Hursean M.	Chapter 7
Debtor(s)	
VERIFICATION OF O	CREDITOR MATRIX
	Number of Creditors 37
The above-named Debtor(s) hereby verifies that the list of cred  Date: April 5, 2018  Debtor	ditors is true and correct to the best of my (our) knowledge.
Joint Debtor	

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· · · · · · · · · · · · · · · · · · ·		
Fill in this information to identify your case:		
Debtor 1 Hursean M. McGraw-Whitfield		
First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing) First Name Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DIS	STRICT OF ILLINOIS, EASTERN DIVISION	
Case number		
(if known)		☐ Check if this is an
		amended filing
Official Form 108		
Statement of Intention for Indi	ividuals Filing Under Chanter	r <b>7</b> 12/15
Statement of intention for ma	Triadais i iiiig Onder Onapte	12/13
If you are an individual filing under chapter 7, you must fi	ll out this form if:	
creditors have claims secured by your property, or		
you have leased personal property and the lease has r	not expired.	
You must file this form with the court within 30 days after		
whichever is earlier, unless the court extends the the form	ne time for cause. You must also send copies to the cre	ditors and lessors you list on
If two married people are filing together in a joint case, bo and date the form.	th are equally responsible for supplying correct inform	ation. Both debtors must sign
Be as complete and accurate as possible. If more space is write your name and case number (if known).	s needed, attach a separate sheet to this form. On the to	op of any additional pages,
you mand and accommon (in missing).		
Part 1: List Your Creditors Who Have Secured Claims		
1. For any creditors that you listed in Part 1 of Schedule I	): Creditors Who Have Claims Secured by Property (Of	ficial Form 106D), fill in the
information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Wild Control of Control and the state of the Control of the Control of the Control of the Control of Control o		
Credited Communication Floring		_
Creditor's Carmax Auto Finance name:	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
name.	Retain the property and enter into a Reaffirmation	□Yes
Description of 2015 Nissan Altima	Agreement.	<b>=</b> 165
property	☐ Retain the property and [explain]:	
securing debt:		
	<del></del>	
Creditor's Loancare Servicing Ctr	☐ Surrender the property.	■ No
name:	Retain the property and redeem it.	■ NO
	☐ Retain the property and enter into a Reaffirmation	☐ Yes
Description of 1496 Forest Ave, Calumet City, property IL 60409-6241	Agreement.	
hh)	Retain the property and [explain]:	
securing debt:	Retain and pay pursuant to contract	
Creditor's Regional Acceptance Co	Surrender the property.	■ No
name:	Retain the property and redeem it.	
December of 601111	☐ Retain the property and enter into a Reaffirmation	☐ Yes
Description of 2011 Hyundai Sonata	Agreement.	
property securing debt:	☐ Retain the property and [explain]:	
Official Form 108 Statement of	Intention for Individuals Filing Under Chapter 7	page :

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Debtor 1 McGraw-Whitfield, Hursean M.	Case number(if known)
Part 2: List Your Unexpired Personal Property Leases  For any unexpired personal property lease that you listed in Schedule G: Executor the information below. Do not list real estate leases. Unexpired leases are leases the may assume an unexpired personal property lease if the trustee does not assume in the control of t	at are still in effect; the lease period has not yet ended. You
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Part 3: Sign Below	L les
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease.	
Hursean M. McGraw-Whitfield Signature of Debtor 1	re of Debtor 2
Date April 5, 2018 Date	

 $_{B201B\;(Form\;2GBS; e.18}\textbf{-10262}$ 

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Document Page 57 of 62 United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:	Case No.
McGraw-Whitfield, Hursean M.	Chapter 7
Debtor(s)	

	TICE TO CONSUMER DEBTOR(S) F THE BANKRUPTCY CODE	
Certificate of [Non-Attor	ney] Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signing the notice, as required by § 342(b) of the Bankruptcy Code.	debtor's petition, hereby certify that I delivered	to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Prepare Address:	petition preparer i the Social Securit principal, respons the bankruptcy pe	
X	(Required by 11 U	J.S.C. § 110.)
partner whose Social Security number is provided above.	i, responsible person, or	
Certifi	cate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and rea	d the attached notice, as required by § 342(b) of	the Bankruptcy Code.
McGraw-Whitfield, Hursean M.	X /s/ Hursean M. McGraw-Whitfield	4/09/2018
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)		
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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B201B (Form 201B) (12/09)

#### United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:	Case No			
McGraw-Whitfield, Hursean M.	Chapter 7			
Debtor(s)				
	E TO CONSUMER DEBTOR(S) IE BANKRUPTCY CODE			
Certificate of [Non-Attorney	Bankruptcy Petition Preparer			
I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.				
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)			
v	(Required by 11 U.S.C. § 110.)			
X	ponsible person, or			
Certificate	of the Debtor			
I (We), the debtor(s), affirm that I (we) have received and read the	attached notice, as required by § 342(b) of the Bankruptcy Code.			
McGraw-Whitfield, Hursean M.	(X) 4/05/2018			
Printed Name(s) of Debtor(s)	Signature of Debtor Date			
Case No. (if known)	X Signature of Joint Debtor (if any)  Date			
	Date			

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	McGraw-Whitfield, Hursean M.		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	PENSATION OF ATTO	RNEY FOR D	EBTOR	
c	cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 ompensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy	, or agreed to be paid	to me, for services re	
	For legal services, I have agreed to accept		\$	750.00	
	Prior to the filing of this statement I have received	d	\$	750.00	
	Balance Due		\$	0.00	
2. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. <b>I</b>	I have not agreed to share the above-disclosed confirm.	npensation with any other persor	unless they are men	nbers and associates of	f my law
[	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				aw firm. A
5. I	n return for the above-disclosed fee, I have agreed to	render legal service for all aspec	cts of the bankruptcy	case, including:	
b c	<ul> <li>Analysis of the debtor's financial situation, and rene</li> <li>Preparation and filing of any petition, schedules, st</li> <li>Representation of the debtor at the meeting of credi</li> <li>[Other provisions as needed]</li> </ul>	atement of affairs and plan whic	h may be required;	•	ruptcy;
6. E	by agreement with the debtor(s), the above-disclosed is	fee does not include the following	ng service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	or payment to me for	representation of the d	ebtor(s) in
<b>April 9, 2018</b> <i>Date</i>		/s/ Michael R. Richm Michael R. Richm Signature of Attorne Heller & Richmon	nond ey		_
		33 N Dearborn St Chicago, IL 6060: (312) 781-6700 F mrichmond@hell Name of law firm	2-3828 Fax: (312) 781-673	2	

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Northern District of Illinois, Eastern Division

In r	e McGraw-Whitfield, Hursean M.		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTORN	EY FOR I	DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered on be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	750.00	
	Prior to the filing of this statement I have received		\$	750.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):			•	
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed composition.	ensation with any other person unle	ess they are mer	mbers and associates of my law	
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspects of	the bankruptcy	case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credito</li> <li>d. [Other provisions as needed]</li> </ul>	ment of affairs and plan which ma	y be required;	• •	
6.	By agreement with the debtor(s), the above-disclosed fee	does not include the following ser	vice:		
	· · · · · · · · · · · · · · · · · · ·	CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for pay	ment to me for	representation of the debtor(s) in	
	April 9, 2018	/s/ Michael R. Richmo	ond		
7	Date	Michael R. Richmond			
		Signature of Attorney Heller & Richmond, L	.td.		
		33 N Dearborn St Ste	1907		
		Chicago, IL 60602-38			
		(312) 781-6700 Fax: mrichmond@hellerric			
		Name of law firm			
Ь					

#### ATTORNEY-CLIENT AGREEMENT

This Agreement is made this 25th day of August 2017 by and between Heller & Richmond, Ltd. (hereinafter referred to as "Attorney) of 33 N. Dearborn St., Suite 1907, Chicago, IL 60602 and Hursean McGraw-Whitfield (hereinafter referred to as "Client") of Calumet City, IL

WHEREAS, "Client" desires to engage the legal services of "Attorney" to advise and represent "Client" concerning "Client's" desire to seek Bankruptcy relief pursuant to title 11 of the United States Code; and

WHEREAS, "Attorney" desires to provide such legal services to "Client":

IT IS HEREBY AGREED by and between the Parties hereto, in consideration of the mutual covenants contained herein:

#### **TERMS OF AGREEMENT**

- 1. Professional Legal Services to be Provided.
- A. Attorney shall provide the following professional legal services for "Client" in the above referenced bankruptcy matter:
  - 1. Analysis of the "Client's" financial situation and rendering advice to the "Client" in determining whether to file a petition in bankruptcy:
  - 2. Preparation and filing of any petition, schedules, statement of affairs, or plan which may be required.
  - 3. Representation of "Client" at the meeting of the creditors and confirmation hearing;
  - 4. Other:
- B. Professional legal services to be provided by "Attorney" to "Client shall not include:
  - 1. Rendering advice or representing any other person or entity related to or a dependent of "Client";
  - Filing a notice of appeal, or prosecuting or defending an appeal of any judicial ruling, except by separate agreement of the parties, hereto; or,
  - 3. Representing "Client" in any other judicial or administrative or alternative dispute resolution proceeding, except by separate agreement of the parties, hereto;
  - 4. The filing of any adversary complaint to determine the dischargability of an otherwise non-dischargeable debt.
- 2. Compensation for Legal Service Provided. "Client" agrees to pay to "Attorney" and "Attorney" agrees to accept from "Client" \$ 750.00 for the performance of these services (hereinafter referred to as "fee") in addition to the costs of approximately three hundred ninety five dollars\*\* (\$395.00)

It is hereby acknowledged that this "fee" has been based upon "Client's" representation that he/she has the following type and number of debts:

- a. -3- secured creditors;
- b. +10 unsecured creditors: (\*UP TO 30 UNSECURED CREDITORS)
- c. -0- priority debts; (GOVT. DEBT INCLUDING STUDENT LOAN IS GENERALLY NOT DISCHARGABLE)

This stated "fee" has been further based upon "Client's representation that he/she has:

- a. -0- law suits pending against him/her;
- b. -0- wage assignments pending against him/her.

"Client" agrees to pay an additional fee of one hundred dollars (\$100.00) for each of the following additional items that have not been disclosed above:

- a. each secured creditor:
- b. each group of up to ten unsecured creditors over the first ten unsecured creditors;
- c. each law suit or wage assignment pending against "Client" at the time the bankruptcy is filed;
- d. "Attorney" notification to the Secretary of State of the bankruptcy in the event "Client"s driving privileges had been previously suspended in accordance with the financial responsibility laws of the State of Illinois

"Client" also acknowledges that the "fee" has been determined based upon the minimal amount of expected work to be performed on this bankruptcy matter, and that if additional legal services, such as representing "Client" in contested matters or adversary proceedings, must be performed, if "Client" fails to attend a meeting of the creditors or any court hearing or if the petition, once prepared, has to be revised due to "Client's" failure to provide complete or accurate information, including but not limited to the list of creditors as referred to in Section 5(f) below or if "Attorney" is forced to take any steps to collect any past due Attorneys fees from "Client", "Client" shall be responsible for additional fees at a rate of two hundred fifty dollars (\$250.00) per hour.

"Client" agrees to pay all fees and court costs as follows:

- 1. \$ 500.00 upon the execution of this agreement;
- 2. Balance due prior to filing, but within 90 days

"Client" acknowledges that "Attorney" is not responsible for filing a petition or initiating any bankruptcy proceeding until "Client" has paid "Attorney" at least \$
\$ 1145.00 and that any monies paid upon the execution of this agreement are non-refundable and are intended to compensate "Attorney" for his time spent in compiling the information necessary to prepare, or other steps towards the preparation of, a petition in bankruptcy.

3. Client Cooperation. "Client" agrees to fully cooperate with "Attorney" in performing professional legal services, including, but not limited to, fully disclosing all of "Client's" potential assets and liabilities, timely appearing at meetings and hearings, promptly returning phone calls from "Attorney" to "Client", promptly communicating any changes in circumstances to "Attorney", including change of employment and change of address, and paying all legal fees and expenses as they become due. "Client" hereby warrants and covenants that he/she has fully disclosed to "Attorney" all known or suspected real property, tangible and intangible personal property, debts, leases contracts, claims in favor of or against "Client" and taxes owed.

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- 4. Termination of Agreement.
- A. "Client" may terminate this Agreement with "Attorney" at any time upon written notice to "Attorney". In the event of such termination, "Client" shall pay all legal fees incurred and shall notify "Attorney" in writing, if "Client" desires his/her file turned-over to any person or entity.
- B. "Attorney" may terminate this Agreement upon written notice to "Client" for "cause". "Cause shall include, but shall not be limited to the following:
  - "Attorney" learning of "Client's" intention to commit an act that may constitute a bankruptcy crime or fraud or other unlawful conduct, and "Client's" refusal to refrain from such conduct;
  - 2. "Client's" failure to promptly pay legal fees or expenses incurred; or
  - 3. Any other permissive or mandatory cause to withdraw form the Attorney-Client relationship as provided for in the Code of Professional Responsibility.
    - 5. "Client" acknowledgment.

A. "Attorney" has advised "Client" that his/her spouse, if any is jointly liable for many of "Client's" debts that have been incurred, since the time of "Client's" marriage and that "Client's" spouse can be held responsible for these debts, unless the spouse files a joint or separate petition for bankruptcy. "Attorney" has advised "Client" that there would be no additional legal "fee" or court costs to add the "Client's" spouse on a joint petition for bankruptcy, provided that the spouse does not have any creditors other than those upon which "Client's" fee was based.

B. "Attorney" has advised "Client" that some debts may not be dischargeable and in particular, secured debts or those in which "Client" has pledged some property as collateral against a loan or other financing, are not dischargeable, unless "Client" is willing to return the property, which has been pledged as collateral, to the creditor. "Client" has been further advised that in many instances he/she may retain the property, which has been pledged as collateral, if he/she agree to reaffirm the debt and continue to pay the creditor, as they were bound to do, before the filing of bankruptcy.

- C. "Attorney" has reviewed with "Client" his/her options to file under Chapter 7, Chapter 11 and Chapter 13 of Title 11 of the United States Code and "Client" has elected to proceed under Chapter 7 "Client" is aware that if he/she proceeds with a Chapter 7 then he/she will be required to forfeit any and all property owned in full or in part by "Client" other than those exemptions permitted by statute and in most instances the amount of property entitled to those exemptions is minimal. The property that could be forfeited includes, but is not limited to real estate, cash, bank accounts, household goods and furnishings, appliances, artwork, collections, sports equipment, tools, jewelry, income tax refunds, vehicles or anything else of value or potential value.
- D. "Client" acknowledges that he/she has read both front and back of this agreement and "Attorney" has answered any questions that "Client" may have had about its content.
  - E. "Client" acknowledges receipt of a copy of this agreement at the time of its execution.
- F. It is the obligation of "Client" to supply "Attorney" with a neat, legible and complete list of all creditors of "Client" and for each creditor include their complete name, address, account number and balance owed; also, if that account was referred to a collection agency or lawyer then also include the name, address and account number of the collection agency or lawyer.
- G. "Client" understands that "Attorney's" obligation to represent "Client" will end no later than upon the entry of the Order of Discharge in Bankruptcy and "Client" will be responsible for payment of additional fees at the rate of two hundred dollars (\$200.00) per hour for any service that might be requested after the entry of the Order of Discharge including but not limited to telephone advise, file retrieval, providing copies of any file related documents and issues concerning credit bureau reports, obtaining credit or other forms of credit repair.
- H. "Glient" hereby warrants and covenants that he/she has truthfully and fully disclosed to "Attorney" all known or suspected information requested by any aspect of the entire Bankruptcy Petition and that it is the responsibility of "Glient" to be certain that this information is all accurately displayed in the actual Bankruptcy Petition at the time "Glient" affixes his/her signature(s) thereto.

\*\* costs include the court filing fee of \$335.00, the online prebankruptcy counseling and online debt management class and the 3-bureau credit report of \$60.00 for an individual report or \$70.00 for a joint report for husband and wife.

Heller & Richmond, Ltd.

By:

HELLER & RICHMOND, LTD.
33 N. Dearborn Street
Suite 1907

Chicago, IL 60602 (312) 781-6700

I AGREE TO ALLITHE TERMS CONTAINED IN THIS DOCUMENT

By affixing my signature above, I hereby certify that I have not filed any petition for bankruptcy within the past 8 years, except as otherwise noted as follows:

NONE

YES, I HEREBY INSTRUCT ATTORNEY TO PROVIDE CLIENT WITH A 3-BUREAU CREDIT REPORT and I AGREE TO PAY THE COST OF THIRTY FIVE DOLLARS (\$35.00) per person FOR THE REPORT IN ADDITION TO ALL OTHER FEES. This additional fee must be paid before the Bankruptcy Petition will be filed.